

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 623546	RECEIPT DATE:	09 / 05 / 00
IA NUMBER:	PCT/ SE99 / 00254	IA FILING DATE:	02 / 24 / 99
FAMILY NAME:	<del>MATERIAL</del> ANDERSON	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	<del>REFLECTING</del> STIG	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	03 / 05 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	SG 00318	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: JAMES RAY & ASSOCIATES

STREET: 2640 PITCAIRN ROAD

CITY: MONROEVILLE

STATE/COUNTRY: PA ZIP: 15146

EMAIL:

APPLICATION TITLES:

REFLECTING MATERIAL

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/623,546	<b>FILING DATE</b> 12/11/2000 <b>RULE</b> -	<b>CLASS</b> 428	<b>GROUP ART UNIT</b> 1772	<b>ATTORNEY DOCKET NO.</b> SG 00318
<b>APPLICANTS</b> Stig Andersson, Hoganas, SWEDEN;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/SE99/00254 02/24/1999 <i>at pln</i>				
<b>** FOREIGN APPLICATIONS *****</b> SWEDEN 9800689-3 03/05/1998 <i>ok pln</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 01/30/2001</b> -				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 13
Verified and Acknowledged Examiner's Signature <i>pln</i> Initials			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> James Ray & Associates 2640 Pitcairn Road Monroeville, PA 15146				
<b>TITLE</b> Reflecting material				
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	



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CONFIRMATION NO. 4814

<b>SERIAL NUMBER</b> 09/623,546	<b>FILING DATE</b> 12/11/2000 <b>RULE</b>	<b>CLASS</b> 428	<b>GROUP ART UNIT</b> 1772	<b>ATTORNEY DOCKET NO.</b> SG 00318	
<b>APPLICANTS</b> Stig Andersson, Hoganas, SWEDEN; <b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/SE99/00254 02/24/1999 <b>** FOREIGN APPLICATIONS *****</b> SWEDEN 9800689-3 03/05/1998					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/30/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> James Ray & Associates 2640 Pitcairn Road Monroeville, PA 15146					
<b>TITLE</b> Reflecting material					
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other <input type="checkbox"/> Credit		